

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) WORKING FOR US POLITICAL ACTION COMMITTEE INC		FEC IDENTIFICATION NUMBER ▼ C C00430876	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	
		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 04 / 16 / 2016</div> </div>	

Full Name of Payee Mundy Katowitz Media, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2016	
Mailing Address 1322 G Street, SE		Amount 5000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : SE.4664
Purpose of Expenditure TV Production - 'Deal'	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2016	
Name of Federal Candidate DONNA FERN EDWARDS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1565478.45</div>	

Full Name of Payee Mundy Katowitz Media, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 15 / 2016	
Mailing Address 1322 G Street, SE		Amount 539974.30	
City Washington	State DC	Zip Code 20003	Transaction ID : SE.4665
Purpose of Expenditure TV Media - 'Deal'	Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 04 / 15 / 2016	
Name of Federal Candidate DONNA FERN EDWARDS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		<div style="border: 1px solid black; padding: 2px; display: inline-block;">1560478.45</div>	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	544974.30
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	544974.30

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Steven Rosenthal

[Electronically Filed]

Date

 MM / DD / YYYY
 04 / 16 / 2016

Signature